## SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name:

Trey Hollingsworth

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							L										Spouse/DC Asset with Income over \$1,000,000"		1		호
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			(See Filer Note 1 for HCP Entities)	HGI - Midwest III, LLC (Rosemount, MN)	HGI - Midwest III, LLC (Louisville, KY)	HGI - Indiana, LLC (Cedar Rapids, IA)	-Cash (First Bank)	HCP - LA, LLC (Financial Asset Holding Co)	-Vanguard Federal Money Market Fund	-Enterprise Products Partners LTD (EPD)	-Certificates of Deposit (Macquarle Group Limited)	HGI, LLC (Financial Asset Holding Co)	Hollingsworth Capital Partners, LLC	HCP - Virginia, LLC	H Capital Partners - Texas, LLC	ARSET NAME		BLOCK A Assets and/or Income Sources
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SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name:

Trey Hollingsworth

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**SCHEDULE B - TRANSACTIONS** Name: Trey Hollingsworth Page 7 of 13

								HCP - Kentucky, LLC	HGI - Indiana, LLC (Indianapolis, IN)	HGI - Midwest III, LLC (Rosemount, MN)	HGI - Midwest III, LLC (Louisville, KY)	HGI - Indiana, LLC (Cedar Rapids, IA)	SP Example Maga Corp Stock	SP,DC,JT Asset	only a portion of an asset is sold, please choose "partial sale" as the type of transaction.  Capital Galms: If a sales transaction resulted in a capital gain in excess of \$200, check the "capital garns" box, unless it was an asset in a tax-deferred eccount, and disclose the capital garn income on Schedule A.  *Column K is for assets solely held by your spouse or dependent child.	dependent child for investment or the production of income, include transactions that dependent or the premium of the production of income, include transactions that resulted in a capital loss. Provide a brief description of an exchange transaction. Exclude transactions between you, your spouse, or dependent children, or the numbers or said of your personnel subseque under a prevention and for the numbers or said of your personnel subseque under a prevention of the numbers or said of your personnel statement and a prevention of the numbers or said of your personnel statement.	Report any purchase, sale, or exchange transactions that exceeded \$1,000 in the months needed of any security or rail arrowers hald by you your spouse, or your
							<u> </u>			×	×	×		_	Purchase		  -  -
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								x					×		Partial Sale		ansacti
															Exchange		13
													×		Check Box If Capital Gr \$200	an Exceeded	
								11/13/20	9/14/20	10/14/20	10/06/20	09/15/20	3920		or Quarterly, Monithly, or Bi- weebly, if applicable	(EXACOM)	Date
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															Over \$1,000,000* (Spouse/DC Asset)	*	

### SCHEDULE C - EARNED INCOME

	Name:	
	Page 8 of 13	
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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below. EXCLUDE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

in addition, certain t	INCOME LIMIT'S and PROHIBITED INCOME: The 2020 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$28,845. The 2021 limit is \$29,595 in addition, certain types of income (notably honorana, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited.	dat or above the "senior staff" rate was \$2 relationship) are totally prohibited.	28,845. The 2021 limit is \$29,595.
	Source (include date of receipt for honoraria)	Туре	Amount
	Keene State	Approved Teaching Fee	\$6,000
Examples:	State of Manyand	Legislative Person	\$18.000
	Oriario County Board of Education	Spouse Select	NA
Circe LLC, 36	Circe LLC, 3642 Brownsboro Rd, #101, Louisville, KY 40207	Spouse Salary	N/A

#### SCHEDULE D - LIABILITIES

rting period by y	
of the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting	Name:
ast amount owed during the reporting	Page 9 of 13

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or your dependent child. Mark the highest amount owed during the reporting period. Members: Members are required to report all liabilities secured by real property including mortgages on their personal residence. Exclude: Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a revolving charge account (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. "Column K is for liabilities held solely by your spouse or dependent child.

							>	moun		<b>Amount of Liability</b>	-		
<del>8</del>		Date		*	œ	c	ט	m	71	6	Ŧ	_	_
بار 8	Creditor	Incurred MO/YR	Type of Liability	\$10,001- \$15,000	\$15,001- \$50,000	\$50,001- \$100,000	\$100,001- \$250,000	\$250,001- \$500,000	\$500,001- \$1,000,000	\$1,000,001- \$5,000,000	\$5,000,001- \$25,000,000	\$25,000,001- \$50,000,000	Over \$50,000,000
	Example First Bank of Wilmington, DE	DE 5/20	Mortgage on Rental Property, Dover, DE				×						
	None												
		-											

#### **SCHEDULE E - POSITIONS**

Report all positions, compensated or uncompensated, held during the current or prior calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organizations, or educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. None Position Name of Organization

#### SCHEDULE F - AGREEMENTS

Name: Page 5 6 <u>ت</u>

	one	Identify the continuation employer.	Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.  Date  Parties to Agreement  Terms of Agreement	with respect to: future employment; a leav ment; or continuing participation in an em
		Parties	to Agreement	Terms of Agreement

#### SCHEDULE G - GIFTS

Report the source (by name), a brief description, and the value of all gifts totaling more than \$415 received by you, your spouse, or your dependent child from any source during the year. Exclude: Gifts from relatives, gifts of personal hospitality from an individual (which may not include a registered lobbylist or foreign agent), local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$166 or less need not be added towards the \$415 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule and some gifts require prior approval of the Committee on Ethics.

	Source	Description	Value
Example:	Mr. Joseph Smith, Arlington, VA	Silver Platter (prior determination of personal friendship received from the Committee on Effics)	\$600
None			

# SCHEDULE H - TRAVEL PAYMENTS and REIMBURSEMENTS

Name:	
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Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$415 received by you, your spouse, or your dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor or were paid by you and reimbursed by the sponsor.

EXCLUDE: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (FGDA, 5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to

Source	Government of China (MECCEA)	Examples: Haster for Humanity (Charity Fundraiser)	None							
Source	(MECEA)	(Charly Fundraiser)								
Deto(a)	Aug. 6-11	Mar. 3-4								
City of Departure-Deathation-City of Return	ОС-Өнүүд Сим-ОС	DC-Boalon-DC								
Lodging? (YAV)	*	*								
Food? (Y/M)	*	¥								
Family Member tricluded? (Y/N)	Z	*								

#### Use additional sheets if more space is required.

# SCHEDULE I - PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIA

Name:	
Page 12 of 13	

List the source, confidential list  Examples:  None	List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of paying an honorarium to you. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics.    Source	f an event to a charitable organization  Activity  Speech  Article	in lieu of paying en honorari <b>Date</b> Feb. 2, 2020  Aug. 13, 2020	um to you. A separate  Amount \$2,000 \$500
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#### FILER NOTES (Optional)

Name: Page 13 of

NOTE NUMBER	NOTES
<b>-</b>	HCP (Jeffersonville, O.H. Greenville, SC.); Texas (Fort Worth, TX); Kentucky (Louisville, KY; Mt. Sterling, KY); Alabama (Montgomery, AL); Investments I (St. Louis, MO); Virginia (Petersburg, VA); Tennessee (Jackson, TN); Arkansas (Little Rock, AR); Georgia (Norcross, GA); McDonough (McDonough, GA); DFW Office (Fort Worth, TX); Fulton Industrial (Atlanta, GA); Indiana (Indianapolis, IN); Intermodal (Louisville, KY); Investments II (Decatur, GA; Erlanger, KY; Cincinnati, OH; Charleston, SC; Greensboro, NC; Winston-Salem, NC); Investments III (Camden, NI; Houston, TX; Memphia; TN); Memphia (Atlanta, GA; Columbia, SC; Louisville, KY);
	Middle Tennessee (Gordonsville, TN); South Carolina (Simpsonville, SC); Investments IV (Charlotte, NC); SCM (Indianapolis, IN); SK (Fairfield, OH); RA (Farifield, OH); North Carolina (Greensboro, NC); Columbus, OH); Investments VI (Duncan, SC; Kettering, OH); Augusta (Augusta, GA)
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